

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DR		07-26-61
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SB	895	09-13-01
RESPONSE FORMALITY REVIEW	MD	JCR	04/13/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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5/12/01
09/13/01
9/5
4/5/01